



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 8053

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/533,928	07/29/2005	128	3771	4398-427
<b>APPLICANTS</b> Michael Berthon-Jones, Leonay, AUSTRALIA; Peter Edward Bateman, Cherrybrook, AUSTRALIA; Donald Darkin, Dural, AUSTRALIA; Robin Garth Hitchcock, North Parramatta, AUSTRALIA; Philip James Jenkinson, Epping, AUSTRALIA; Susan Robyn Lynch, Epping, AUSTRALIA; Gordon Joseph Malouf, Gympsea Bay, AUSTRALIA; Patrick John McAuliffe, Epping, AUSTRALIA; Milind Chandrakant Raje, Wentworthville, AUSTRALIA; Gary Christopher Robinson, East Killara, AUSTRALIA; Richard Sokolov, Earlwood, AUSTRALIA; Philip Thomas Stallard, Denistone East, AUSTRALIA; Michael Kassipillai Gunaratnam, Marsfield, AUSTRALIA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU03/01471 11/06/2003 which claims benefit of 60/424,005 11/06/2002 and claims benefit of 60/447,327 02/14/2003 * and claims benefit of 60/488,752 07/22/2003 * and claims benefit of 60/503,896 09/22/2003 * (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b> <div style="float: right; border: 1px solid black; padding: 2px;">Yes /CTO/</div>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> <div style="float: right; border: 1px solid black; padding: 2px;">None /CTO/</div>				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /CLINTON T OSTRUP/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWINGS</b> 90	<b>TOTAL CLAIMS</b> 33
<b>INDEPENDENT CLAIMS</b> 11				
<b>ADDRESS</b> NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203 UNITED STATES				
<b>TITLE</b> Mask and components thereof				
<b>FILING FEE RECEIVED</b> 3780	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)	

		<input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
--	--	---